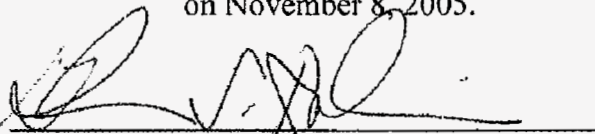


EXHIBIT 2

AFFIDAVIT

I, Glenn S. Rabin, do hereby declare under penalty of perjury as follows:

1. I am the authorized legal representative of Alltel Communications, Inc. ("Alltel") charged with responsibility for filing Alltel's Petition for Designation as a Temporary Eligible Telecommunications Carrier ("ETC") under the Alternative Designation Process established pursuant to *In the Matter of Federal-State Joint Board on Universal Service*, CC Docket 96-45 (rel. October 14, 2005).
2. Alltel intends to offer temporary Lifeline services to qualifying consumers consistent with the terms of the above-described order and the representations of the application to which this affidavit is attached and the exhibits appended thereto.
3. Alltel meets the criteria for ETC designation as explained herein.'
4. To the best of my knowledge, neither Alltel, nor its officers, directors, or persons holding five percent or more of Alltel's outstanding stock or shares (voting and/or non-voting), as specified in Section 1.2002(b) of the Commission's rules, are subject to a denial of federal benefits, including FCC benefits, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862.
5. I declare under penalty of perjury that the foregoing is true and correct. Executed on November 8, 2005.



Name: Glenn S. Rabin
Vice President, Federal Communications Counsel

Its Authorized Representative

Exhibit 3

FORM OF LIFELINE CERTIFICATION

Sales Rep Name & Contact Phone Number (please print) _____
Customer Phone Number /SSN/Drivers License _____
Customer Name _____
Street/PO Box City State Zip _____
(temporary address) _____
(temporary phone number) _____
(e-mail address [optional]) _____

In order to qualify for the Temporary Lifeline Rate Plan, you must satisfy all requirements listed below (place a check mark next to each category if you satisfy the requirements). Only those consumers who satisfy all the below requirements are eligible for the Temporary Lifeline Rate Plan:

- I have qualified and currently receive FEMA housing assistance without incurring a repayment obligation _____
- I have provided documentation to Alltel that FEMA has deemed me eligible for FEMA disaster housing assistance and have no repayment obligation _____ (proof of FEMA documentation attached)
- I certify that I resided in _____ County, a county that was struck by Hurricane Katrina and a county within the FEMA declared Hurricane Disaster Area.

I certify under penalty of perjury that:

- I am the head of a household eligible to receive benefits from the program(s) identified herein and that no member of my household is currently receiving such benefits;
- The information contained on this form is true and correct to the best of my information and belief;
- I am aware that this temporary program will expire on March 1, 2006, and after that date, I will not qualify for this rate plan, but have the option of subscribing to other services that Alltel provides if that is my choice.
- I acknowledge that this rate plan is limited to one per household.

I have read the information on this application and understand that I must meet the above qualifications to receive Temporary Lifeline.

Print Applicant Name Date

Applicant Signature

Print Sales Representative Name Date

Sales Representative Signature

Federal Lifeline and/or Link-Up Assistance Certification